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KENT COUNTY COUNCIL

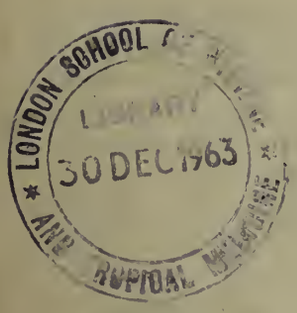
EDUCATION COMMITTEE

ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

For the Year 1942



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School Medical Officer

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REPORT ON THE MEDICAL INSPECTION and TREATMENT of SCHOOL CHILDREN, 1942.

THE NATIONAL EMERGENCY.—Difficulties due to air raids have remained in abeyance, and problems in connection with billeted children have not in general been found insoluble. The unfavourable elements now developing are shortage of staff and of petrol supplies. All the schools are now open, including some small ones closed before the war.

STAFF.—Dr. Campbell and Dr. Roberts, Assistant School Medical Officers, both of East Kent, left late in the year to join H.M. Forces. Mr. Nicholl, dental surgeon, has resigned his appointment and taken up another elsewhere. Miss Campbell and Mr. Markham, School Dental Surgeons, will be leaving shortly to take up war work. Miss Bryant, a dental surgeon on the temporary staff, will also be leaving early in the New Year to take up another appointment. Dr. Ledger, an Assistant School Medical Officer, has been transferred wholly to the Maternity and Child Welfare section of the department.

New appointments are Dr. Hirsch and Dr. Meagher, temporary whole-time Assistant School Medical Officers, and Dr. Day and Dr. Megaw, temporary part-time Assistant School Medical Officers, Miss Bryant, Mr. Fuchs and Mr. Schachter, temporary whole-time school dental surgeons, and Mrs. Murch, temporary part-time dental surgeon. It is hoped, too, that Dr. E. Grace Nicholls, on the staff of the Public Health Committee, will be able to devote some time to school work early in the New Year.

MEDICAL INSPECTION.—The work of the department has been carried on almost normally throughout the year, the above changes being prospective or too late to affect results. Actually there has been an appreciable rise in the number of children examined, especially of " entrants " (see table 1). The suggested explanations for this are migration from London, return of evacuees, and the inclusion of children who have missed examination in the earlier war years.

NUTRITION.—Concern about the health of the child population naturally increases during war-time ; hence the findings of the School Medical Service should be of more than usual interest. The prevailing conviction in the Service is that health has been maintained and that there is no occasion for anxiety. Health, like beauty, cannot be assessed objectively, except perhaps in relation to its opposite, so reliance has to be placed on the general impression of doctors, nurses and others. There is also Table 2 on page 7, which gives the composite result of the doctors' estimates of nutrition of individual children. This table is practically the same as for years past, including pre-war years.

Malnutrition being closely associated with ignorance and carelessness, with and without poverty, Table 5 on page 9 showing the prevalence of uncleanliness, gives some indirect confirmation of the view that nutrition is little changed for it is itself unchanged.

School canteens, milk in schools, the national loaf and the wide distribution of fish liver oil and fruit juices with the help of radio talks have no doubt all contributed to the maintenance of health in the face of unfavourable factors. Of the unfavourable factors, mention is made most often of the lack of sleep in the summer, and neglect due to the absence all day of both parents on war work. Physical welfare has been little affected even in those areas where air raids or threats of them have been frequent.

SCHOOL MEALS.—During the year ended 31st March, 1942, the number of meals provided in Elementary School Canteens was 1,582,206, which is the highest number recorded at any time since the inception of the school meals service. It is over 700,000 more meals than were provided last year, and more than 400,000 above the previous highest figure in 1938-39. This increase is due to the stimulus towards communal meals which has been fostered as a part of Government policy and shows itself in other sections of the Community by the provisions of British Restaurants, Cash and Carry Kitchens, and Mobile and Works Canteens. The Committee have undertaken an extensive development of the school meals

service and many new projects in various parts of the County which have been started during the past few months will reach fruition during 1943 and a further considerable increase in the number of meals provided to school children may be expected during that year and after. The following figures show how the number of children who are being fed has increased. They relate only to Elementary Schools but include billeted as well as native children :—

		Comparative figures for 1941.
February, 1942	9,836	(5,292)
May, 1942	11,370	(7,058)
October, 1942	13,587	(8,449)

In addition, some 9,000 children were having meals in Secondary Schools and Further Education Institutions by the end of the year 1942.

It was stated in my last report that the Education Committee had agreed to undertake the responsibility of making arrangements for the feeding of the civilian population in rural areas and in certain urban areas in the County if and when an emergency arises and that, as part of the scheme, were setting up in strategic situations several central cooking depots. This scheme has undergone considerable modification but the Committee have proceeded with the provision of the central kitchens and have in fact decided to double the original number of 6, and to use them to their full capacity for providing school meals. Some of these Central Kitchens are now in operation and are each providing meals (conveyed in insulated containers) for children attending several schools. Similar arrangements are being made for the conveyance of meals from certain school canteens where it has been possible to extend the facilities for cooking. Generally, however, the speed with which these developments are taking place is limited by shortage of equipment, of labour and of materials. It is highly satisfactory to say that there has been no shortage of foodstuffs. In fact, the Committee's officers are at present pressing for full use to be made of the generous rations which have been made available by the Board of Education and the Ministry of Food for school meals, as it has been found that they are not universally being fully taken up, partly because it has been found possible to provide a satisfying, if not so nutritious, a meal on less rations than are in fact available.

Apart from solid meals, the Milk in Schools Scheme continues as an essential measure for maintaining the nutrition of school children during the war. The following figures show the number of children who were having milk at the date stated. They include billeted children :—

	Elementary Schools	*Secondary and Further Education Schools*
February, 1942	56,064	9,885
May, 1942	58,121	10,458
October, 1942	55,814	11,685

More than 5,200 of the children having milk in October were having it free.

Milk in Schools—Pathologist's Report.

The most noteworthy feature in connection with the bacteriological examination of school milks during the year was the decrease in the number infected with tubercle bacilli. Of 299 raw milks examined biologically, 9 were found to contain living tubercle bacilli, i.e., 3.01 per cent. as compared with 15 out of 301 samples i.e., 4.98 per cent. in the previous year. This figure is well below the 1938 level of 5.01 per cent. and shows a decided improvement since 1939 when it reached the high level of 7.5 per cent. Of 80 " Pasteurised " milks similarly examined during the year, one was found to contain tubercle bacilli : there is no information available as to the method by which this milk was supposed to have been pasteurised.

469 " raw " milks and 573 " pasteurised " samples were examined for bacteriological cleanliness. Of the former 89.3 per cent. and of the latter 93.2 per cent. passed the prescribed tests as compared with 88.81 per cent. and 92.5 per cent. respectively during the previous year. This must be considered satisfactory in view of the present day difficulties of milk producers and retailers.

Medical Treatment.

Minor Ailments.—There has been a considerable increase in the prevalence of skin infections and sores, necessitating more treatment sessions at the school clinics, particularly in N.W. Kent. Some of the increase is attributable to the fact that many mothers are engaged on war work. There was an increase of scabies before the war began and its subsequent further spread caused serious misgiving. However, since local authorities have been empowered to take suitable action, many of the most intractable foci of infection have been dealt with and there is now reason to hope for better control.

The number of children found verminous in the schools remains unchanged, though more examinations have been made.

Defective Vision.—The eye clinics continue to function normally, though towards the close of the year, there was increasing difficulty in obtaining a supply of lenses. Large hand lenses for the use in ordinary schools by the " partially sighted " are no longer procurable.

Chronic Tonsilitis and Adenoids.—The number of cases in which operative treatment is advised has always been liable to violent fluctuation. During 1942, the number of children operated on is more than double the corresponding number for 1941 (but the same as for 1938) partly because cases were held up in earlier war years and waiting lists are now being reduced. Whenever practicable cases are referred to the Committee's Aural Surgeon before official approval is given.

Defective Hearing and Ear Disease.—The aural clinics held by Mr. T. P. Gill, F.R.C.S. continue to give most valuable service, especially in clearing up chronic ear discharges. The provision of simple hearing aids for use in the schools is often productive of marked educational benefit. The following is Mr. Gill's summary of the year's work :—

Cases of Otitis Media.

New Cases	343
Total Attendances	1472
Cases Cured	156
Still under treatment	88
No treatment required	59
Lapsed	40

Nasal Cases.

New Cases	187
Total Attendances	812
Cured	74
Still under treatment	52
No treatment required	44
Lapsed	...17

Hard of Hearing Cases.

New Cases	165
Total attendances	896
Cases cured	76
Cases partially relieved	24
Cases unrelieved	12
Still under treatment	31
Lapsed	22

Tonsil and Adenoid Cases.

Total Examinations	317
Cases requiring Treatment	145
No treatment required	88
Cases under observation	84
Total Attendances	3,497

Asthma.—A recent development is the inauguration of "asthma clinics," where children are given special breathing exercises and encouraged to carry them out at home. The results to date more than justify any extension which may be found practicable.

Postural Deformities.—These are also treated with suitable exercises at two school clinics, in liaison with the nearest orthopædic clinic.

Speech Clinics at Dartford and Chislehurst continue as heretofore, but there are more cases than can be dealt with. The work is of the greatest value and I advise that it be extended as far as circumstances permit. Dr. Stableforth has furnished a report on the year's work, and the following extract will give an idea of its volume :—

No. of cases	treated	172
,, ,,	discharged	72
,, ,,	still attending	100
,, ,,	referred for physical treatment	6
,, ,,	referred for psychological treatment	4
,, ,,	referred for surgical treatment ...	3
,, ,,	referred for dental treatment ...	7

The Dental Service.—The following are extracts from the annual report of Mr. F. J. Saunders, the Senior Dental Officer :—

"Arrangements have been made with the Beckenham Education Committee for their dental surgeon to undertake on behalf of the Committee the inspection and treatment of pupils in attendance at schools for further education. The Committee are negotiating similar arrangements with the Bromley Education Committee."

"The premises at Canterbury and the whole of the equipment was completely destroyed by enemy action on the night of May 31st. Since then the work has been carried on at the Kent and Canterbury Hospital, who are thanked for offering the use of their premises and equipment."

"The staff of 16 whole-time and 1 part-time Dental Surgeons are devoting approximately 14½/17ths of their time to the inspection and treatment of school children, and 2/17ths to the Maternity and Child Welfare Dental Scheme under the auspices of the County Council; while 2 Dental Surgeons in two autonomous areas devote approximately 4/11ths of their time to the inspection and treatment of pupils in attendance at schools for further education."

"The work done consists of inspection and treatment of elementary and secondary school children and treatment in connection with maternity and child welfare patients. Two-thirds of the children were inspected, and of these, two-thirds were found to be in need of treatment, and of those children needing treatment, one-half only accepted it."

"The average daily output of work per dentist is :—

	Attendances	*Completely treated*	*New Cases*	*Extractions*	*Fillings inserted*
Elementary	15.74	6.60	6.18	13.54	10.08
Secondary	17.60	6.16	6.40	4.40	18.32

"

"The work done on behalf of the County Council for the Maternity and Child Welfare Service is as follows :—

Attendances		*Extractions*		*Fillings*		*Other Treatment*	
Adult	*Minor*	*Permanent Teeth.*	*Temporary Teeth.*	*Permanent Teeth.*	*Temporary Teeth.*	*Per. T.*	*Temp. T.*
632	780	7813	920	769	232	149	371

while in the County Dental workshop 757 dentures have been constructed and 68 repaired."

Mr. Saunders adds that, to make the dental service complete, another six dental surgeons will be required, with provision of suitable premises to work in.

Dental disease is the immediate cause of much illness and loss of time, beside resulting in a heavy financial burden on the community. At best, the dental service is only a palliative, however necessary ; and as yet we know little of the origin of caries and have done even less about its eradication. It is almost certain that defective diet is the chief factor in the causation. Many dentists believe that improvement among the youngest children has been effected by war-time restrictions, including the introduction of the national loaf—which should stay.

Ante-natal clinics and maternity and child welfare centres are suitable foci for the dissemination of instruction in dietetics.

Child Guidance Clinics.—Unfortunately the two assistant school medical Officers with special knowledge of child guidance have been called up to join H.M. Forces. Similarly, the services of the psychiatrist at Tunbridge Wells are no longer available. Guy's Hospital, with the County Hospital at Farnborough and the West End Hospital for Nervous Diseases, continue to give valuable assistance for cases from N.W. Kent. Very few children have been reported as requiring help of this kind by reason of enemy action, and in most of these instances, it is believed that any nervous instability shown is a reflection of the effect on adult members of the household.

Kent Voluntary Association for Mental Welfare in their report for 1942, stress the need for child guidance clinics. In the absence of these, with their attached social workers, this Association is giving much appreciated help in securing assistance for children brought to their notice. Attention is also drawn to the importance of the supervision of feeble-minded children beginning at the earliest possible age, as in these circumstances, the effective co-operation of parents is more likely to be secured.

The Kent Council of Social Service report that, under the "delicate school children" scheme, a total of 9136 children were under supervision in 1942, 6,405 being brought forward from 1941. Mention is made of milk supplied in 38 cases, and cod liver oil etc., in 166 cases.

There are 305 voluntary supervisors. It is thought that about £50 a month will be required during 1943 for ancillary nourishment, and that an expenditure of £600 will be incurred on this branch of the Council's activities for administration.

National Society for the Prevention of Cruelty to Children are asked for assistance in cases of neglect when other efforts to obtain amelioration of the children's condition have failed. The help so afforded is successful in the majority of cases. Action is reported in the case of 128 families, involving 278 children. The services of this Society are invaluable.

Table 1

Medical Inspections of Children Attending Public Elementary Schools.

A.—Routine Medical Inspections.

Number of Inspections in the Prescribed Groups.

Entrants	12,715
Second Age Group	9,112
Third Age Group	8,040
Total	29,867
Number of other Routine Inspections	—
Grand Total	29,867

B.—Other Inspections.

Number of Special Inspections and Re-Inspections	43,064

Table 2

Classification of the Nutrition of Children Inspected during the year in the Routine Age Groups, year ended December **31st, 1942.**

Age-groups	Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants	12,715	2,145	16.9	9,191	72.3	1,339	10.5	40	0.3
Second Age-group ...	9,112	1,507	16.6	6,289	69.0	1,260	13.8	56	0.6
Third Age-group... ...	8,040	1,652	20.6	5,220	64.9	1,092	13.6	76	0.9
Other Routine Inspections	—	—	—	—	—	—	—	—	—
Total	29,867	5,304	17.7	20,700	69.3	3,691	12.4	172	0.6

Table 3.

Group I.—Minor Ailments (excluding Uncleanliness).

Total Number of Defects treated or under treatment during the year under the Authority's Scheme ... 9,303

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

	No. of Defects dealt with.		
	Under the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including squint).	3,859	57	3,916
Other defect or disease of the eyes (excluding those recorded in Group I)	—	—	—
Total	3,859	57	3,916

	Under the Authority's Scheme.	Otherwise.	Total.
No. of Children for whom spectacles were			
(*a*) Prescribed	1,589	14	1,603
(*b*) Obtained	1,351	12	1,363

Group III.—Treatment of Defects of Nose and Throat.

No. of Defects.			
Received Operative Treatment.			
Under the Authority's Scheme, in Clinic or Hospital. (1)	By Private Practitioner or Hospital, apart from the Authority's Scheme. (2)	Received other forms of Treatment. (3)	Total number treated. (4)
1,186	375	—	1,561

NOTE.—The figures given in the above Groups II. and III. relate to the year ended 30th June, 1942.

Table 4.

Dental Inspection and Treatment.

(1)	Number of children inspected by the Dentists :			
	(*a*) Routine Age Groups...	53,341		
	(*b*) Specials	1,404		
	(*c*) TOTAL (Routine and Specials)		Total	54,745
(2)	Number found to require treatment	35,764		
(3)	Number actually treated...	20,596		
(4)	Attendances made by children for treatment	41,504		
(5)	Half-days devoted to ... Inspection	456¼	Total	5,724¼
	Treatment	5,268		
(6)	Fillings Permanent Teeth ...	20,267	Total	23,571
	Temporary Teeth ...	3,304		
(7)	Extractions Permanent Teeth ...	6,033	Total	35,676
	Temporary Teeth ...	29,643		
(8)	Administrations of general anæsthetics for extractions			623
(9)	Other operations Permanent Teeth ...	5,835	Total	10,051
	Temporary Teeth ...	4,216		

Table 5.

Uncleanliness and Verminous Conditions.

(i)	Average number of visits per school made during the year by the School Nurses	5.4
(ii)	Total number of examinations of children in the Schools by School Nurses	212,801
(iii)	Number of individual children found unclean	3,506
(iv)	Number of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921	—
(v)	Number of cases in which legal proceedings were taken :	
	(*a*) Under the Education Act, 1921	—
	(*b*) Under the School Attendance Byelaws	14

Table 6—*Blind and Deaf Children.*

	At Public Elementary Schools. (1)	At an Institution other than a Special School. (2)	At no School or Institution. (3)	Total not receiving suitable education. (4)
Blind Children ...	—	—	—	—
Deaf Children ...	—	—	6	6

Mentally Defective Children.

Total number of children notified during the year ending 31st December, 1942, by the Local Education Authority to the Local Mental Deficiency Authority, under the Mental Deficiency (Notification of Children) Regulations, 1928 **45.**

Table 7.

Maintained, Aided, Junior Technical, Junior Commercial, Day Trades and Private Schools.

Number of Children Inspected 1*st January*, **1942**, *to* **31***st December*, **1942**.

A.—Routine Medical Inspections.

Age.	5	6	7	8	9	10	11	12
Number examined	44	23	26	118	165	256	1684	579

Age.	13	14	15	16	17	18	19	Totals.
Number Examined	631	2,856	715	2,066	72	23	2	9,260

B.—Other Inspections.

Number of Special Inspections and Re-Inspections	7,188

Table 8

Classification of the Nutrition of Children Inspected during the year in the Routine Age Groups, year ended December **31***st* **1942**.

Year of Birth	Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
1931	1,684	331	20	1,187	70	165	10	1	—
1928	2,856	630	22	2,023	71	196	7	7	—
1926	2,066	577	28	1,397	68	86	4	6	—
Other Ages	2,654	553	21	1,884	71	212	8	5	—
Total	9,260	2,091	23	6,491	70	659	7	19	—

Table 9.

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

	No. of Defects dealt with.		
	Under the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including squint).	991	298	1,289
Other defect or disease of the eyes (excluding those recorded in Group I)	—	—	—
Total	991	298	1,289

	Under the Authority's Scheme.	Otherwise.	Total.
No. of Children for whom spectacles were			
(*a*) Prescribed	436	92	528
(*b*) Obtained	365	92	457

Group III.—Treatment of Defects of Nose and Throat.

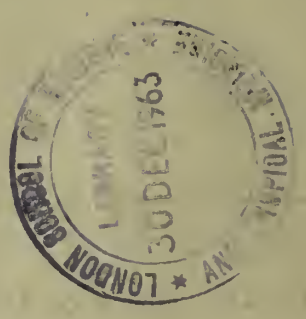
No. of Defects.			
Received Operative Treatment.			
Under the Authority's Scheme, in Clinic or Hospital. (1)	By Private Practitioner or Hospital, apart from the Authority's Scheme. (2)	Received other forms of Treatment. (3)	Total number treated. (4)
22	36	—	58

NOTE.—The figures given in the above Groups relate to the year ended 30th June, 1942.

Table 10.

Dental Inspection and Treatment.

(1)	Number of Children inspected by the Dentists ...		11,063		
(2)	Number found to require treatment		6,996		
(3)	Number actually treated		3,181		
(4)	Attendances made by children for treatment		8,735		
(5)	Half-days devoted to ...	Inspection	$102\frac{3}{4}$	Total	$1,093\frac{1}{2}$
		Treatment	$990\frac{3}{4}$		
(6)	Fillings	Permanent Teeth ...	8,298	Total	8,321
		Temporary Teeth ...	23		
(7)	Extractions	Permanent Teeth ...	1,571	Total	2,202
		Temporary Teeth ...	631		
(8)	Administrations of general anæsthetics for extractions		95		
(9)	Other Operations ...	Permanent Teeth ...	1,320	Total	1,386
		Temporary Teeth ...	66		


LONDON
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